

FROM McANDREWS, HELD, & MALLOY

(TUE) 4.18'06 12:09/ST. 12:09/NO. 4861050421 P.1



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TO: Examiner Yuwen Pan
Group Art Unit 2682

FAX NO.: 571 273 8300

FROM: Michael T. Cruz

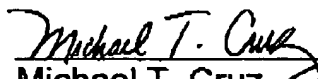
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CLIENT: 1772

MATTER: 17402US01

Number of Pages This Transmission (Including Cover Page): 6

I hereby certify that the attached correspondence, including a Transmittal Sheet (1 Page), a Fee Transmittal (1 Page) and a Petition for a Three-Month Extension of Time (2 Pages since filed in Duplicate) and a Request for Continued Examination (RCE) (1 Page), is being sent via facsimile transmission to the United States Patent and Trademark Office on April 18, 2006.


Michael T. Cruz
Reg. No. 44,636

PTO/SB/21 (09-04)

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)		Application Number	09/747,392			
		Filing Date	December 22, 2000			
		First Named Inventor	Fei Xie			
		Art Unit	2682			
		Examiner Name	Yuwen Pan			
Total Number of Pages in This Submission	5	Attorney Docket Number	17402US01			
ENCLOSURES (check all that apply)						
<table border="0"> <tr> <td style="vertical-align: top;"> <input checked="" type="checkbox"/> Fee Transmittal Form (1 Page) <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extens. of Time Req. (1 Page) <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53 </td> <td style="vertical-align: top;"> <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD </td> <td style="vertical-align: top;"> <input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Return-Receipt Postcard <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <i>Request for Continued Examination (RCE) (1 Page)</i> </td> </tr> </table>				<input checked="" type="checkbox"/> Fee Transmittal Form (1 Page) <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extens. of Time Req. (1 Page) <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Return-Receipt Postcard <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <i>Request for Continued Examination (RCE) (1 Page)</i>
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Remarks		Extension of Time Request is filed in Duplicate.				
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT						
Firm	McAndrews Held & Malloy, Ltd.					
Signature	<i>Michael T. Cruz</i>					
Printed Name	Michael T. Cruz					
Date	April 18, 2006					
CERTIFICATE OF FAX TRANSMITTAL						
I hereby certify that this correspondence is being sent via facsimile transmission to Yuwen Pan, an Examiner of the United States Patent and Trademark Office, at (571) 273-8300 on April 18, 2006.						
Name (Print/type)	Michael T. Cruz	Registration No. (Attorney/Agent)	44,636			
Signature	<i>Michael T. Cruz</i>	Date	April 18, 2006			

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Fees pursuant to the consolidated Appropriates Act, 2005 (H.R. 4818). FEE TRANSMITTAL for FY 2006		Complete if Known Application Number: 09/747,392 Filing Date: December 22, 2000 First Named Inventor: Fei Xie Examiner Name: Yuwen Pan Art Unit: 2682 Attorney Docket No.: 17402US01																															
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		RECEIVED CENTRAL FAX CENTER APR 18 2006																															
TOTAL AMOUNT OF PAYMENT (\$) 1810.00																																	
METHOD OF PAYMENT (check all that apply) <input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____ <input checked="" type="checkbox"/> Deposit Account Deposit Account Number: <u>13-0017</u> Deposit Account Name: <u>McAndrews Held & Malloy</u> For the above-identified deposit account, the Director is hereby authorized to (check all that apply) <input checked="" type="checkbox"/> Charge Fee(s) indicated below <input type="checkbox"/> Charge Fee(s) indicated below, except for the filing fee <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fees(s) under 37 CFR 1.16 and 1.17 <input checked="" type="checkbox"/> Credit any overpayments																																	
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.																																	
FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)																																	
1. BASIC FILING, SEARCH, AND EXAMINATION FEES																																	
FILING FEES <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>Application Type</th> <th>Fee (\$)</th> <th>Small Entity Fee (\$)</th> </tr> </thead> <tbody> <tr><td>Utility</td><td>300</td><td>150</td></tr> <tr><td>Design</td><td>200</td><td>100</td></tr> <tr><td>Plant</td><td>200</td><td>100</td></tr> <tr><td>Reissue</td><td>300</td><td>150</td></tr> <tr><td>Provisional</td><td>200</td><td>100</td></tr> </tbody> </table>		Application Type	Fee (\$)	Small Entity Fee (\$)	Utility	300	150	Design	200	100	Plant	200	100	Reissue	300	150	Provisional	200	100	SEARCH FEES <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>Fee (\$)</th> <th>Small Entity Fee (\$)</th> </tr> </thead> <tbody> <tr><td>500</td><td>250</td></tr> <tr><td>100</td><td>50</td></tr> <tr><td>300</td><td>150</td></tr> <tr><td>500</td><td>250</td></tr> <tr><td>0</td><td>0</td></tr> </tbody> </table>		Fee (\$)	Small Entity Fee (\$)	500	250	100	50	300	150	500	250	0	0
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2. EXCESS CLAIM FEES																																	
Fee Description Each claim over 20 (including Reissues) Each independent claim over 3 (including Reissues) Multiple dependent claims		Small Entity Fee (\$) 50 200 360																															
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3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(a)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).																																	
Total Sheets -100 Extra Sheets /50 Number of each additional 50 or fraction thereof (round up to a whole number) x Fee (\$) = Fee Paid (\$)																																	
4. OTHER FEE(S)																																	
Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge):		Request for Continued Examination (RCE) Fee (\$790); 3-Month Extension-of-Time Fee (\$1020) 1810.00																															
SUBMITTED BY																																	
Signature	<u>Michael T. Cruz</u>	Registration No. (Attorney/Agent)	44,636																														
Name (print/type)	Michael T. Cruz	Telephone	(312) 775-8084																														
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